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Health

TeenScreen is not a pill pusher, honest By Evelyn Pringle

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July 27, 2005—TeenScreen's website contains a lot of bull but for now I shall only address its assertions that the program is not affiliated with the pharmaceutical industry and that it has nothing to do with plugging any particular drug.

Laurie Flynn is the former executive director of the National Alliance for the Mental Illness (NAMI). In 2000, she left NAMI to become executive director of the TeenScreen program at Columbia University.

Flynn is the author of an article I ran across, titled "Before Their Time: Preventing Teen Suicide," in which she states: "The TeenScreen Program developed 10 years ago by Columbia University and offered in partnership with the National Alliance for the Mentally III helps communities across the nation identify teens with mental illness who might be at risk for suicide."

Now I do not know if Flynn remembers writing that article, but I do know that nowadays she is trying to distance TeenScreen's affiliation with NAMI and for good reason, since I and others have publicized the fact that the NAMI gang is nothing but a pill-pushing front group funded by the pharmaceutical industry.

Its kind of hard to dispute this charge being that the NAMI website lists "Corporate Partners, Grants, and Foundations," as Abbott, AstraZoneca, Bristol-Meyers-Squibb, Eli Lilly, Forest Lab, Glaxo-Smith-Kline, Jannsen, McNeil, Pfizer, and Wyeth.

So if TeenScreen is being "offered in partnership," with the NAMI, I'd say there is a good chance that a bit of drug money might be seeping into its coffers.

The truth is, during Flynn's 16-year reign over the NAMI, pharma paid her salary. According to internal documents obtained by Mother Jones Magazine, over a period of just three years, from 1996 to mid-1999, 18 firms game NAMI a total of \$11.72 million, including Janssen, Novartis, Pfizer, Abbott Labs, Wyeth-Ayerst, and Bristol-Myers Squibb.

NAMI's largest donor was Eli Lilly, which gave \$2.87 million during that period. In 1999 alone, Lilly delivered \$1.1 million in quarterly installments, according to Mother Jones.

Flynn did not leave NAMI to facilitate the TeenScreen scam, she merely received a promotion within the same company.

The truth is that none of the 100 or more front groups—named association of this or alliance of that—that make up the gigantic worldwide web and serve as the hub for all the industry marketing schemes, would even exist if they were not propped up with drug money.

According to a March 9, press release, the Health and Social Campaigners' Network International, conducted a survey of annual reports from these "patient advocacy groups" that revealed an escalation in pharma donations, but for market-driven reasons.

The survey looked at the top 12 donors (Pfizer, GSK, AstraZeneca, Johnson & Johnson, Merck, Novartis, Aventis, Roche, Eli Lilly, Bristol-Myers Squibb, Wyeth, and Abbott), plus the types of health-based charities to which the companies gave their money.

In almost 100 percent of the cases, the companies gave money to the groups that specialize in the therapeutic areas in which the drug companies research, develop or market products.

Overall, pharma funding can account for more than half the revenue received by these groups and yet only four of the 125 annual reports contained information about the specific amounts of money provided by pharma. Not surprisingly, these details were almost entirely absent from most of the reports.

In fact, only four of the groups were willing to name their drug company donors and reveal exact amounts. Why all the secrecy? I would think that they would want to openly thank these gracious drug companies for all their kind donations that supposedly come with no strings attached.

An official statement recently added to TeenScreen's website states: "Even though local programs make no treatment recommendations, we believe any funding received from a pharmaceutical company could create the appearance of a possible inducement to recommend treatment. We strongly recommend that local TeenScreen programs do not receive funding from companies that market medicines for adolescent depression or other mental health problems identified by the screening program."

That statement is a blatant lie. The May 2002 issue of the Update Newsletter reported: "Some 170 students responded to a "TeenScreen" survey conducted by NAMI Nashville and Columbia University."

"TeenScreen was funded through grants from AdvoCare and Eli Lilly," the newsletter reported. In fact, Eli Lilly funded an entire week of events, according to Update.

TeenScreen also says it does not recommend any certain medications. Well, as it turns out, that happens to be a lie as well because in 1999, Executive Director Laurie Flynn wrote the forward for a book that was written to specifically promote the most expensive psychiatric drugs on the market, titled "Breakthroughs in Antipsychotic Medications: A Guide for Consumers, Families, and Clinicians," by Peter J Weiden, Ronald J Diamond.

The current prices for a month's supply of the top three antipsychotics that Flynn recommends in the book (and is now pushing on our children) are: Risperdal, \$342; Seroquel, \$414; and Zyprexa, \$572

Antidepressant prescriptions written for children in the US increased over 500 percent from 1999 to 2003. For the middle-dose range on three antidepressants that Flynn promoted, prices are Zoloft, \$214; Effexor, \$234; and Wellbutrin, \$144.

How safe are these drugs that TeenScreen is pushing overall?

On March 22, 2004, the FDA issued a "Public Health Advisory" that cautioned about the risks associated with all of the antidepressants including Prozac, Zoloft, Paxil, Luvox, Celexa, and Lexapro, as well as Wellbutrin, Effexor, Serzone, and Remeron. The warning followed a public hearing at which dozens of family members and victims testified about suicide and violence committed by people who were taking these medications.

About 40 relatives of children testified that the drugs had had tragic consequences. A father testified how his 17-year-old daughter hanged herself after seven days on Pfizer's Zoloft, which her doctor had stressed was safe

Mark Miller, testified that his 13-year-old son, Matt, had hanged himself after taking seven doses of Zoloft.

Paxil was one of the drugs prescribed to children when it was relatively untested. It has since been linked to numerous lethal side effects in kids. Lawsuits have listed the drug as the culprit in cases of murder,

suicide, debilitating disease and school shootings. In June of 2003, the FDA issued a warning that Paxil should not be prescribed to persons under 18 due to an alarming number of suicides by kids on the drug.

On April 12, The New York Times reported that the FDA now requires black box warnings about the increased risk of death on the labels of Zyprexa (Eli Lilly) and Risperdal (Johnson & Johnson).

The drug companies have known all along that these drugs are dangerous. In 2003, the Journal of the American Medical Association published the results of two trials on children treated with Zoloft. Seventeen children had to be pulled out of the trial because of side effects, compared with only five who were given a placebo.

But to top it off, with all of their lethal side effects, these drugs don't even work. In the Zoloft studies, only 10 percent more children improved on the drug than those taking a placebo.

Dr. David Antonuccio, a psychologist at the University of Nevada, also testified at the FDA hearing and said that after doing an analysis of 12 studies on the use of antidepressants on children, his team of experts determined that the benefits of antidepressants on kids were so small as to be clinically insignificant, and do not warrant any of the increased risk for suicidal behavior or even some of the lesser common side effects, such as agitation, insomnia, and gastrointestinal problems.

Beyond that, Peter Breggin, MD, who for more than a decade has written books and reports on these drugs, said that "multiple studies have shown that antidepressants are no better than a sugar pill. People who are depressed often respond to a placebo because it gives them hope."

In July 2005, the FDA issued another warning which states, "Children taking antidepressants may increase suicidal thoughts and actions in about one out of 50 people 18 years or younger."

Official estimates have revealed that more than 1 million kids in this country are taking these drugs. So using the FDA's numbers that would mean that 200,000 children are having suicidal thoughts and actions.

As for saving kids from suicide, statistics show that neither TeenScreen nor the drugs its been peddling have shown any success whatsoever in reducing the number of teen suicides.

While discussing Jeff Weise, the latest teen shooter from Minnesota who was on one of these drugs at the time of his rampage and subsequent suicide, staunch anti-child drugging advocate Doyle Mills raised an excellent point about teen suicides when he said "try to find a suicide victim who has not already received some form of psychiatric treatment, usually drugs."

Records researchers Sue Weibert and Ken Kramer contributed to this report.

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